2	**INCOME/CATEGORICAL ELIGIBILITY**	*Effective: 12/01/95*
2.5	**Priority System**	*Revised: 11/01/02*

POLICY: The local project must use the priority system to rank participants according to the level of nutritional risk. Preference for enrollment must be given to higher priority individuals (regardless of date of application as compared to participants of lower priority) for enrollment in WIC. Within a priority level, individuals are considered of equal priority.

PROCEDURE:

A. IDENTIFICATION OF ALL RISK FACTORS
The competent professional authority (CPA) identifies all the risk factors and the priority is determined by the risk factor(s) in the highest priority group.

B. PRIORITY ASSIGNED BY DAISy
Priority assigned by DAISy will apply the highest priority for the participant based on risk factors and status at certification. Refer to the WIC Risk Factor Reference Sheets DPH 4025 and 4026.

Priority System for Nutritional Risk Criteria

Priority 1A - Pregnant women, breastfeeding women and infants with at least one "high" risk hematological, anthropometric, medical, or dietary risk factor which demonstrates the person's need for supplemental foods, women breastfeeding a Priority 1A infant, and breastfed infants of Priority 1A mothers.

Priority 1B - Pregnant women, breastfeeding women and infants with at least one "at risk" hematological, anthropometric, or medical risk factor which demonstrates the person's need for supplemental foods, women breastfeeding a Priority 1B infant, and breastfed infants of Priority 1B mothers. Pregnant women and infants with at least one "at risk" dietary risk factor.

Priority 2B - Infants whose mothers were on WIC prenatally or who could have been on WIC with a Priority 1 risk factor and women breastfeeding a Priority 2B infant.

Priority 3A - Children with at least one "high" risk hematological, anthropometric, medical, or dietary risk factor which demonstrates the need for supplemental foods.

Priority 3B - Children with at least one "at risk" hematological, anthropometric, medical risk factor which demonstrates the need for supplemental foods.

Priority 4A – Pregnant women, breastfeeding women and infants with a "high risk" dietary risk factor. Women breastfeeding a priority 4A infant, or breastfed infants of Priority 4A mothers. Infants who are homeless, migrants, victims of abuse/battering, or in foster care. Infant with primary caregiver with limited ability.

Priority 4B - Breastfeeding women or infants with at least one "at risk" dietary risk factor, women breastfeeding a priority 4B infant, or breastfed infants of a Priority 4B mothers. Pregnant women and breastfeeding women or infants who are homeless, migrants, victims of abuse/battering, or in foster care.

Priority 4C - Pregnant women, breastfeeding women and infants with at least one dietary risk factor, women breastfeeding a priority 4C infant, or breastfed infants of Priority 4C mothers.

Priority 5A - Postpartum women with at least one "high risk" hematological, anthropometric, medical or dietary risk factor. Postpartum women with a "at risk" dietary risk factor. Child with primary caregiver with limited ability.

Priority 5B - Postpartum women with at least one "at risk" anthropometric, medical, or dietary risk factor; children with a dietary risk factor. Children who are homeless, migrants, victims of abuse/battering, or in foster care.

Priority 5C - Children with a "at risk" dietary risk factor.

Priority 6B - Postpartum women with at least one "at risk" hematological, anthropometric, or medical risk factor. Postpartum women who are homeless, migrants, victims of abuse/battering, or in foster care.

Priority 6C - Postpartum women with at least one "at risk" dietary risk factor.

C. INFANTS OF WIC MOMS
Infants of WIC moms who were enrolled shortly after birth without going through the full certification process must have the risk factors updated when full eligibility assessment is done. (See 2.7 Certification of Infants of WIC Mothers for additional information)